DOCUMENT RESUME

ED 476 220 RC 024 065

AUTHOR	Allen, Melissa; Ashbaker, Betty Y.; Stott, Kathryn A.
TITLE	Strengthening Rural Schools: Training Paraprofessionals in Crisis Prevention and Intervention.
PUB DATE	2003-03-00
NOTE	7p.; In: Rural Survival. Proceedings of the Annual Conference of the American Council on Rural Special Education (ACRES) (23rd, Salt Lake City, UT, March 20-22, 2003); see RC 024 044.
PUB TYPE	Guides - Non-Classroom (055) -- Speeches/Meeting Papers (150)
EDRS PRICE	EDRS Price MF01/PC01 Plus Postage.
DESCRIPTORS	Conflict Resolution; *Crisis Intervention; Elementary Secondary Education; Mental Health; *Paraprofessional School Personnel; *Prevention; *Rural Schools; *Staff Development; Stress Management; *Training

ABSTRACT

The long-term effects of crisis and tragedy can be improved significantly by immediate intervention and emergency mental health services. Providing crisis intervention in rural schools poses challenges related to lack of financial resources, community resources, and trained personnel; isolation of rural schools; and long distances between school and students' homes. The major responsibility for crisis intervention falls upon local and district school leadership. Logically, rural schools should train and prepare all adults in the school to support students and offer emotional first aid in crisis situations. Paraprofessionals typically live in the community and provide linguistic and cultural continuity between the school and community. Training paraprofessionals to participate in crisis prevention and intervention will increase the number of adults who can assist, will improve communication and teamwork, and will create a sense of community and ownership in the school's crisis intervention plan. This paper outlines elements and issues in such training, including developing a crisis plan tailored to the individual school, organizing a crisis team, personal characteristics needed in a crisis and potential "red flags" that might preclude individuals from helping, tailoring the training to trainees' skills and level of confidence, teaching methods and role playing, and basic topics to include in training. Suicide prevention and preventing student violence and aggression should be emphasized. (Contains 23 references) (SV)

Reproductions supplied by EDRS are the best that can be made
from the original document.

ED 476 220

U.S. DEPARTMENT OF EDUCATION
Office of Educational Research and Improvement
EDUCATIONAL RESOURCES INFORMATION CENTER (ERIC)
This document has been reproduced as received from the person or organization originating it.
Minor changes have been made to improve reproduction quality.
Points of view or opinions stated in this document do not necessarily represent official OERI position or policy.

PERMISSION TO REPRODUCE AND DISSEMINATE THIS MATERIAL HAS BEEN GRANTED BY

Ronda Menlove

TO THE EDUCATIONAL RESOURCES INFORMATION CENTER (ERIC)

1

Melissa Allen, Ph.D., Assistant Professor
Betty Y. Ashbaker, Assistant Professor
Kathryn A. Stott, Doctoral Student

Brigham Young University
Dept. of Counseling Psych & Special Education
340 MCKB
Provo, UT 84602-5093

For more information contact:
Melissa_Allen@byu.edu
801-422-1235

STRENGTHENING RURAL SCHOOLS: TRAINING PARAPROFESSIONALS IN CRISIS PREVENTION AND INTERVENTION

What is a Crisis?

A crisis is an event or situation that creates "...a temporary state of upset and disorganization, characterized chiefly by an individual's inability to cope with a particular situation using customary methods of problem solving..." (Slaikeu, 1990, p. 15). Bottom line, the emotional and physical demands created by the crisis exceed the available resources. Because of the school's sense of community, a crisis in the context of a school "brings chaos," that "undermines the safety and stability of the entire school" (Johnson, 2000, p. 18).

Need for Immediate Intervention

In 1976, a busload of 26 children in Chowchilla, California was hijacked by three masked men. Taken to an isolated location in the desert, the children were transferred into a trailer in a ravine and covered over with dirt. The children remained in the buried vehicle until they were rescued 27 hours after being abducted. After returning home, the focus was on the physical condition of the children. Much to the relief of parents and school officials, the children appeared to be physically unharmed. However, in a follow up four years later, Terr (1983) reported that these children continued to experience significant anxiety and post traumatic stress as a result of the incident. Terr explained that the children's emotional difficulties were most likely related to the lack of immediate crisis intervention for emotional trauma following their rescue.

During and following a crisis, there is a great need for immediate emotional first-aid. After the 1942 Cocoanut Grove fire in Boston, which claimed the lives of almost 500 people, Eric Lindemann (1944, 1979) noted that immediate intervention with the survivors facilitated the grieving process and recovery. Individuals from various backgrounds, including physicians, emergency medical technicians, nurses, mental health professionals, clergy, and community volunteers, assisted with this emergency.

Although these examples are extreme in nature, there was a difference in outcome based on the type of immediate care provided to survivors. Emergency mental health services provided to the Cocoanut Grove survivors and their families made a significant impact on their recovery process. The long-term effects of the tragedy were greatly reduced due to the immediate mental health care that was provided (Lindemann, 1979).

Specific types of crises affecting the school community include suicide, school shootings, gang activity, natural disasters (earth quakes, hurricanes, floods, tornadoes, etc.), drug abuse, grief and loss, sexual and physical abuse, and medical emergencies (Brock, Sandoval, & Lewis, 2001; Johnson, 2000; Pitcher & Poland, 1992). These crises, directly or indirectly, threaten the security and stability of the school community and tax the available resources.

Rural Schools and Crisis Intervention

Providing crisis intervention in a rural school district poses unique challenges. Some of the obvious difficulties are related to the lack of services in rural communities, more specifically limited access to medical facilities and mental health programs. Frequently rural America is synonymous with poverty and subsequently a lack of funding

RC 024065

BEST COPY AVAILABLE

to cover community resources often available in urban settings. There has been a continual shortage of doctors, nurses, emergency medical services, mental health professionals and police/law enforcement to assist with the everyday needs in rural communities. These shortages are especially evident in the event of a community or school related crisis.

In addition to limited financial resources and community services, the distance between rural schools and students' homes poses another challenge to consider when preparing crisis intervention plans. Because bus routes cover many miles and often treacherous winter road conditions, more responsibility is placed on bus drivers to be trained for emergency situations. During a crisis, the isolation of rural schools and the distance from sources of help creates a greater need for the school to be self-sufficient in meeting students' immediate emotional and physical needs. There is a need for all adults in the rural school setting to be prepared and ready to assist with basic crisis intervention skills. An emergency supply of food, water, and medical supplies is of paramount importance. A backup energy source is also needed, particularly for schools in colder climates.

Who Will Help?

The major responsibility for crisis intervention falls upon local and district school leadership. Although certain employees in the school such as the school counselor, school psychologist, and social worker are typically seen as the trained mental health personnel who deal with crisis situations, it is unrealistic to think that these few individuals could realistically meet the needs of hundreds of students during and following a crisis. Following a crisis, professionals and groups outside the school frequently step in and offer assistance. If the tragedy or crisis is featured in state or national news, national experts are often readily available. Even though this outside help is well intentioned, school administrators are often hesitant about depending on "outsiders" for assistance during critical times of crisis (Johnson, 2000; Poland, Pitcher, & Lazarus, 1999). Outside professionals may have difficulty fitting in and understanding the rural school culture. Although well meaning, these professionals may be perceived as intrusive and over-reactive. Unfortunately, outside assistance may add to the confusion and increase the stress of an already difficult situation. The expert status of outside help may also foster feelings of inadequacy in the school's staff (Weinberg, 1989).

Although outside professionals and, in cases of more catastrophic events, national organizations such as Red Cross and FEMA may offer assistance, logically schools should train and prepare adults within the school, particularly those who are familiar and work directly with students. Ideally all adults in the school should be trained and involved in crisis intervention (Brock et al., 2001; Rouf & Harris, 1988; Smead, 1991). With appropriate training, each adult can support students and intervene immediately to offer emotional first-aid.

Brock et al. (2001) state that a crisis plan "is useless without personnel capable of conducting crisis interventions" (p. 52). Although training for crisis intervention is typically geared toward school counselors, school psychologists and administrators, this presentation is designed to address the basics of teaching basic information of " what to say" and "what to do" to all adults in the school. In particular paraprofessionals are identified as an untapped resource of support during a crisis.

Who are Paraprofessionals?

Public schools in the United States serve over 46.8 million students and employ approximately 2.9 million teachers and 621,000 instructional aides in the classroom (Bairu, 2001). These instructional aids, often referred to as paraprofessionals, are a vital link to the instructional process. Paraprofessionals deliver services to the increasing number of students served in special education, Title I programs, Head Start, and Bilingual or ESL/ESOL programs (French & Pickett, 1997; Morgan, Ashbaker, & Allred, 2000; Vasa, Steckelberg, & Ulrich-Ronning, 1982).

Paraprofessionals in the school cover a wide variety of support positions including teaching assistants, custodians, cafeteria workers, secretaries, and bus drivers. Paraprofessionals interact with students in the classroom and outside the classroom, in the cafeteria, in the hallways, on the playground, on the bus, and during unstructured times before and after school. In these less structured settings, paraprofessionals have opportunities to nurture and listen to students who might have difficulty talking with a counselor or teacher (Johnson, 1998). French and Pickett (1997) state that as school administrators and professionals become more aware of paraprofessionals' contributions,

greater efforts will be made to build upon their natural skills and their untapped potential. This is particularly true in the area of crisis prevention and intervention.

Paraprofessionals and Crisis Intervention

In planning for crisis intervention, the unique contributions of paraprofessionals should be considered. Paraprofessionals typically live in the community. Their children or grandchildren typically attend the school. Because paraprofessionals know the families in the community, they are able to provide a familiar and comfortable support for students and families. Because they speak the language and know the history of the area, they are able to provide both a linguistic and a cultural continuity between the school and the community (Ashbaker & Morgan, 2000; Pickett, 1989; Rubin & Long, 1994).

Training paraprofessionals to participate in crisis prevention and intervention will increase the number of adults prepared to assist, improve communication and teamwork, and create a sense of community and ownership in the school's crisis intervention plan. Ultimately these benefits strengthen the school's support for students and families.

Crisis Plan

Paraprofessionals need to be familiar with the very basic ingredients of crisis intervention. It is important to have a plan. What does a crisis plan do? A plan specifies and organizes people and resources. It defines duties and specifies lines of authority. Having an effective plan reduces panic and chaos. A plan instills confidence. In defining a plan we anticipate "What if" and define "Then this."

Crisis plans must be realistic and tailored to the resources of the individual school setting. The plan must be user friendly, assessable, familiar to all, and flexible enough to adapt to the school's changing needs. The basics of the plan must be posted in each classroom. All must be familiar with the plan for when and how to exit the building and where to meet outside the building. All must be familiar with securing the classroom: locking doors, closing windows, placing students in a safe location in the classroom away from windows and doors. Additionally, it is recommended that all adults in the school become first aid certified through Red Cross in order to meet the physical needs of injured students.

Crisis Team

A crisis team is composed of individuals organized and prepared to work together and carry out the designated duties listed in the crisis plan. Because each duty requires varying levels of "responsibility, availability, and ability," it is important to carefully consider both the individual's capacity and the requirements for the duty (Allen & Ashbaker, in press). An effective crisis plan is dependent on all members of the team and all parts of the plan working effectively to ensure the safety, security, and stability of the school. Each adult in the school should be assigned a duty that is optimally related to their daily job responsibility.

Personal Competencies

Flexibility, capacity for compassion, and resilience are essential personal characteristics in individuals who are effective in meeting the needs of others in crisis (Red Cross, 2002). When an adult adapts to the changing demands and needs during a crisis they are able to function more effectively. It is also important for students to sense a caring attitude and to feel supported and nurtured the adults.

(1) The biggest rule in providing crisis intervention is to remain calm. This is especially important when assisting children, who look to adults for stability during times of crisis (Johnson, 2000). All adults must hold to the crisis plan and do what he/she is assigned to do, follow directions from leadership, and cooperate with others.

(2) Although a person assisting with crisis intervention must show compassion, concern, and respect for others' situations, they must maintain appropriate boundaries. It is important not to over-react and become so involved with the victims that the adult loses perspective and is not able to be an effective helper.

(3) Those assisting with crisis intervention must be able to function adequately during the chaos and stress. It is important that they are also able to recuperate after the crisis. The adults provide a model of resilience for the students.

Potential Red Flags

When preparing paraprofessionals to assist with the school crisis team, be aware of potential red flags. Some behaviors or attitudes that may need to be addressed include the following: seeks hero status, defies authority and leadership, resists team efforts, ignores limits and guidelines, uses inappropriate or insensitive humor to relieve tension, starts or feeds rumors, resists feedback, lacks empathy, and overreacts or lacks emotional stability. In assigning duties, these factors need to be considered. Additionally some adults may not have the physical stamina to handle the emotional stress and the physically challenging aspects of crisis intervention.

The manual for the Red Cross Disaster Mental Health Training (2002, p. 61) lists two questions that may be helpful in screening some of the potential problems associated with individual personalities and characteristics.
(1) "Describe a situation in which you experienced stress and were unable to change the situation. How did you handle the stress?"
(2) "You might be exposed to some very distressing scenes. How will you cope and continue to perform duties?"

Tailoring the Training

Prior to initiating a training program for crisis intervention, it is important to determine the training needs. It is important to consider the individual's past experiences with crisis intervention, their knowledge of crisis intervention skills, and their level of confidence in handling an incident.

(1) Their experiences with crisis may be very personal and recent or more removed, such as familiarity with an event effecting a distant friend or relative. Experiences with crisis will have a carryover effect on how the individual will react to the new crisis situation. The common statement "The best prediction of future behavior is past behavior" also holds true with the paraprofessional's capacity to intervene and assist during a new situation.

(2) The paraprofessional's knowledge of crisis intervention may include previous training, job experiences, life experiences, reading magazines or books, and information gathered from television or videos. It is important to assess the quality and accuracy of this knowledge.

(3) The paraprofessional's level of confidence is most likely related to their previous experiences and their level of knowledge and skill. It is also important to remember that an individual may have varying levels of confidence dependent on the type of situation. For instance some may be very confident in handling emotional issues, but not confident in handling physical injuries.

Teaching the Skills

Crisis intervention skills can be taught in a variety of ways: lecture, including facts and theories; readings or handouts; role play, scenarios, and practice; watching video clips that demonstrate skills; and on-the-job-shadowing of crisis team member. However, the most effective teaching method, based on the authors' experiences, consists of using role plays. When using role plays, follow these steps: (1) set up a scenario, (2) model appropriate behavior, (3) set up another scenario, (4) ask the paraprofessionals to role play & practice skills, (5) share feedback, (6) process information, and (7) problem solve. If necessary, set up several scenarios to role play so that the basic steps are practiced and learned. Allow time for small group discussion about the role plays.

Lecturing is usually not very effective in helping paraprofessionals learn crisis intervention skills. When teaching crisis intervention skills, seeing the skills is better than hearing about the skills. Short video clips provide interesting scenarios and promote discussion. (Make sure that video clips are approved by the school administrator) Popular movie clips provide a resource of both bad and good examples. Commercial training videos, although more expensive, are also a valuable resource. Refer to the handout for a list of suggested video clips.

What to Teach

Basic topics that should be taught to paraprofessionals include the following: basics of the school crisis plan; a clear definition of their role in the crisis plan; how the various roles and responsibilities fit together; specifics of what to do; basic communication skills, particularly how to listen, and how to respond; the basics of what to say; problem solving skills; and limits to their helping …when and how to refer to a school professional. Additionally, it is recommended that all adults in the school become first aid certified through Red Cross in order to meet the physical needs of injured students. At the very least a core group in the school should be trained with these life saving skills.

It is important to focus on the topics of suicide prevention and dealing with and preventing violence/aggression. A heavy emphasis should be place on prevention. "At the very least, all school personnel should be aware of basic signs of depression and anxiety in students" (Prevention Division of the American Association of Suicidology). It is important to identify at risk students and to know the steps in referring them to a professional for help. These students may form a bond with a paraprofessional and see this person as a caring adult, but may have difficulty talking with a teacher or a counselor. It is important to take all threats seriously. Again, it is important for the paraprofessional to know who to report concerns to and how to report the concerns. It is important to give accurate, honest information. Most importantly, paraprofessionals should know the risk signs, how to react, what to say, and what to do. The referral process should be in writing, very clearly stating the protocol and leave no room for confusion

In working with potentially violent and aggressive students, paraprofessionals should know how to prevent and diffuse tense situations (refer to handout). They should know the basics of stress management and relaxation skills. School rules regarding bullying and harassment should be strictly enforced because these low level forms of violence feed into more severe acts of school violence. School violence is more likely to occur in "unowned" areas such as dining areas, hallways and parking lots (Astor, Meyer & Behre, 1999). Prevention should include placing paraprofessionals in locations to offer a higher level of supervision, increasing the number of adults greeting students as they enter the school and creating a welcome atmosphere
An "attitude of caring" within school community has been found to be an effective preventative measure (Hansen & Childs, 1998). Paraprofessionals can be part of the leadership in encouraging a comprehensive approach to violence reduction."

Summary

Paraprofessionals are often an untapped resource in schools. Particularly in rural school districts, where medical and mental health services are limited, paraprofessionals can learn basic crisis intervention skills in meeting the immediate needs of students. They can also support preventative efforts, particularly in the areas of suicide prevention and reducing school violence. Training all adults to assist with crisis intervention in the school will increase teamwork, strengthen unity, and provide students with a more supportive and caring environment.

References

Allen, M., & Ashbaker, B. Y. (in press). Strengthening schools: Involving paraprofessionals in crisis prevention and intervention. *Intervention in School and Clinic.*

Ashbaker, B. Y., & Morgan, J. (2000). Bilingual Paraeducators: What we can learn from Rosa. *NASSP Bulletin: National Association of Secondary School Principals, 84* (614), 53-56.

Astor, R. A., Meyer, H. A., & Behre, W. J. (1999). Unowned places and times: Maps and interviews about violence in high schools. *American Educational Research Journal, 36*, 3-42.

Bairu, G. (2001). *Public school student, staff, and graduate counts by state: School year 1999-2000* (NCES 2001-326r). Washington, DC: United States Department of Education, Office of Educational Research and Improvement.

Brock, S. E., Sandoval, J., & Lewis, S. (2001). *Preparing for crises in the schools: A manual for building school crisis response teams* (2nd ed). New York: Wiley.

French, N. K. & Pickett, A. L. (1997). Paraprofessionals in special education: Issues for teacher educators. *Teacher Education and Special Education, 20* (1), 61-73.

Hansen, J. M., & Childs, J. (September, 1998). Creating a school where people like to be. *Educational Leadership, 56*, 14-17.

Johnson, K. (1998). *Trauma in the Lives of Children*. Alameda, CA: Hunter House.
Johnson, K, (2000). *School crisis management: A hands-on guide to training crisis response teams* (2nd ed.). Alameda, CA: Hunter House.
Lindemann, E. (1944). Symptomatology and management of acute grief. *American Journal of Psychiatry, 101*, 141-148.
Lindemann, E. (1979). *Beyond grief: Studies in crisis intervention*. New York: Aronson.
Morgan, J., Ashbaker, B. Y., & Allred, D. (Spring 2000). Providing training for paraeducators: What motivates them to attend? *The Researcher, 15* (1), 50-55.
Pickett, A. L. (1989) *Restructuring the schools: The role of paraprofessionals. Results in Education*. Washington, DC: National Governors Association.
Pitcher, G. & Poland, S. (1992). *Crisis intervention in the schools*. New York: Guilford Press.
Poland, S., Pitcher, G., & Lazarus, P. J. (1999). Best practices in crisis intervention In A. S. Canter & S. A. Carroll (Eds.), *Crisis prevention and response: A collection of NASP resources* (pp. 69-86). Bethesda, MD: National Association of School Psychologists.
Red Cross Training Manual for Mass Crisis Disaster Training (2002...still being edited).
Rouf, S., & Harris, J. (1988). How to select, train, and supervise a crisis team. *Communique, 17* (4), 19.
Rubin, P. M., & Long, R. M. (1994, Spring). Who is teaching our children: Implications of the use of aides in Chapter 1. *ERS Spectrum*, 28-34.
Slaikeu, K. A. (1990). *Crisis intervention: A handbook for practice and research* (2nd ed.). Needham Heights, MA: Allyn & Bacon.
Smead, V. S. (1991). Best practices in crisis intervention. In *Resources in crisis intervention: School, family, and community applications*. Silver Spring, MD: National Association of School Psychologists.
Terr, L. C. (1983). Chowchilla revisited: The effects of psychic trauma four years after a school-bus kidnapping. *The American Journal of Psychiatry, 140*, 1543-1555.
Vasa, S. F., Steckelberg, A. L., & Ulrich-Ronning, L. (1982). *A state of the art assessment of paraprofessional use in the state of Nebraska*. Lincoln, NE: Department of Special Education, University of Nebraska-Lincoln.
Weinberg, R. B. (1989). Consulting and training with school-based crisis teams. *Professional Psychology: Research and Practice, 20*, 305-308.

U.S. Department of Education
Office of Educational Research and Improvement (OERI)
National Library of Education (NLE)
Educational Resources Information Center (ERIC)

ERIC REPRODUCTION RELEASE

I. Document Identification:

Title: American Council on Rural Special Education
2003 Conference Proceedings
Rural Survival
March 20-22, 2003; Salt Lake City, Utah

Author: Multiple - Editor: Ronda Menlove

Corporate Source: American Council on Rural Special Education (ACRES)

Publication Date: March 2003

II. Reproduction Release:

In order to disseminate as widely as possible timely and significant materials of interest to the educational community, documents announced in the monthly abstract journal of the ERIC system, Resources in Education (RIE), are usually made available to users in microfiche, reproduced paper copy, and electronic media, and sold through the ERIC Document Reproduction Service (EDRS). Credit is given to the source of each document, and, if reproduction release is granted, one of the following notices is affixed to the document.

If permission is granted to reproduce and disseminate the identified document, please check one of the following three options and sign the release form.

__√__ Level 1 - Permitting reproduction and dissemination in microfiche or other ERIC archival media (e.g. electronic) and paper copy.

____ Level 2A - Permitting reproduction and dissemination in microfiche and in electronic media for ERIC archival collection subscribers only.

____ Level 2B - Permitting reproduction and dissemination in microfiche only.

Documents will be processed as indicated provided reproduction quality permits. If permission to reproduce is granted, but no option is marked, documents will be processed at Level 1.

Sign Here: "I hereby grant to the Educational Resources Information Center (ERIC) nonexclusive permission to reproduce and disseminate this document as indicated above. Reproduction from the ERIC microfiche or electronic media by persons other than ERIC employees and its system contractors requires permission from the copyright holder. Exception is made for non-profit reproduction by libraries and other service agencies to satisfy information needs of educators in response to discrete inquiries."

Signature: Ronda Menlove — Position: Proceedings Editor

Printed Name: Ronda Menlove, Ph.D. — Organization: ACRES

Address: 2865 Old Main Hill — Telephone No: 435-797-3911

Logan, Utah 84322-2865 — Date: 13 May 2003

III. Document Availability Information (from Non-ERIC Source):

If permission to reproduce is not granted to ERIC, or, if you wish ERIC to cite the availability of the document from another source, please provide the following information regarding the availability of the document. (ERIC will not announce a document unless it is publicly available, and a dependable source can be specified. Contributors should also be aware that ERIC selection criteria are significantly more stringent for documents that cannot be made available through EDRS.)

Publisher/Distributor:

Address:

Price per copy: Quantity price:

IV. Referral of ERIC to Copyright/Reproduction Rights Holder:

If the right to grant this reproduction release is held by someone other than the addressee, please complete the following:

Name:

Address:

V. Attach this form to the document being submitted and send both to:

Velma Mitchell, Acquisitions Coordinator
ERIC Clearinghouse on Rural Education and Small Schools
P.O. Box 1348
1031 Quarrier Street
Charleston, WV 25325-1348

Phone and electronic mail numbers:

800-624-9120 (Clearinghouse toll-free number)
304-347-0467 (Clearinghouse FAX number)
mitchelv@ael.org